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Commissioner for Patents	Scott H. Kaliko, Esq.
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United States Patent & Trademark Office	MARCH 13, 2007
RECIPIENT'S FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
571-273-8300	3
RECIPIENT'S TELEPHONE NUMBER:	CLIENT / MATTER:
RE:	YOUR REFERENCE NUMBER:
Application No. 10/708,472	

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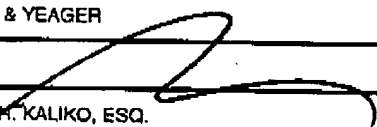
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TRANSMITTAL FORM	Application Number	10/708,472	
	Filing Date	March 5, 2004	
	First Named Inventor	Jim D'Amato	
	Art Unit	Information not Available	
	Examiner Name	Information not Available	
(to be used for all correspondence after initial filing)		Attorney Docket Number	P04-285-BAT
Total Number of Pages In This Submission		3	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	KALIKO & YEAGER		
Signature			
Printed name	SCOTT H. KALIKO, ESQ.		
Date	March 13, 2007	Reg. No.	45,788

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Typed or printed name	SCOTT H. KALIKO, ESQ.	Date	March 13, 2007

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Application Number	10708,472
Filing Date	March 5, 2004
First Named Inventor	Jim D'Amato
Art Unit	Information not available
Examiner Name	Information not available
Attorney Docket Number	P04-265-BAT

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

John Battaglia

Date

3-12-07

Telephone

201-358-8447

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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